



County Probation and Parole Officers'
Firearm Training and Education Commission
Force Response Training Evaluation

Course Title: _____ Date: _____ Location: _____

County: _____ Check One: Adult Juvenile Other _____

| INSTRUCTOR EVALUATION: Please use this number system for this portion of the evaluation: | | | | | |
|--|----------------------|-------------------------|---------------------|-----------------------|----------------|
| Excellent (5) | Very Good (4) | Good (3) | Fair (2) | Poor (1) | |
| Instructor's Name | Knowledge of Subject | Evidence of Preparation | Utilization of Time | Clarity of Discussion | Other Comments |
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| Course Evaluation (please check appropriate response) | Excellent | Very Good | Good | Fair | Poor | Other Comments |
|--|-----------|-----------|------|------|------|----------------|
| Course Name or Subject Content | | | | | | |
| Relevancy to topics (too basic; too advanced; or appropriate) | | | | | | |
| Appropriateness of time allotted to each topic | | | | | | |
| Instructional Materials (If provided, if not put N/A) | | | | | | |
| Audio/Visual Aids (If applicable, if not put N/A) | | | | | | |
| Practical Exercises (If applicable, if not put N/A) | | | | | | |

Other comments:

How would you suggest this course be improved?

What other courses would you like to have offered?